

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|--------|--------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 6 | 5-30-01 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | G.S.W. | | 20 Oct. 2001 |

INDEX OF CLAIMS

| | | | |
|------------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral)... | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | 5 | 10 | |
| 2 | 12 | 10 | |
| 3 | 01 | 04 | |
| 4 | ✓ | | |
| 5 | ✓ | | |
| 6 | ✓ | | |
| 7 | ✓ | | |
| 8 | ✓ | 11 | |
| 9 | ✓ | | |
| 10 | ✓ | | |
| 11 | ✓ | | |
| 12 | ✓ | | |
| 13 | ✓ | | |
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| 50 | ✓ | | |

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)